

United States of America  
Department of Transportation — Federal Aviation Administration  
**Supplemental Type Certificate**

*Number* SA1135SW

*This certificate, issued to* Kerr Aviation Services, Inc.  
P. O. Box 399 - Wiley Post Airport  
Bethany, Oklahoma 73008

*certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 3 of the Civil Air Regulations.*

*Original Product — Type Certificate Number:* 6A1, 2A4

*Make:* Aero Commander

*Model:* 500, 500-A, 500-B, 500-U, 500-S, 560-A, 680, 680-E, 680-F

*Description of Type Design Change:* Modification of fuselage for the installation of Bendix ANA-12 Doppler Antenna according to Master Drawing List MDL 60800 dated 3/10/70, revised 4/6/70.

*Limitations and Conditions:*

**This modification is for structural approval only.**

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

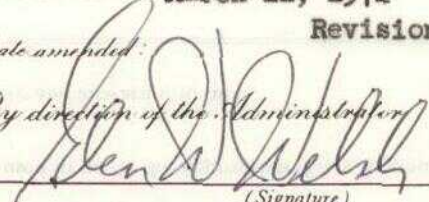
*Date of application:* March 11, 1970

*Date reissued:* March 22, 1971

*Date of issuance:* March 30, 1970

*Date amended:* Revision 1



*By direction of the Administrator*  
  
(Signature)

Glen W. Welsh  
Chief, Engineering and Manufacturing Branch  
(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

This certificate may be transferred in accordance with FAR 21.47.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to (*Name of transferee*) \_\_\_\_\_

(*Address of transferee*) \_\_\_\_\_

(*Number and street*)

(*City, State, and ZIP code*)

from (*Name of grantor*) (*Print or type*) \_\_\_\_\_

(*Address of grantor*) \_\_\_\_\_

(*Number and street*)

(*City, State, and ZIP code*)

Extent of Authority (if licensing agreement): \_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor (*In ink*): \_\_\_\_\_